AMENDMENT TRANSMITTAL LETTER						Docket No. KWO-18902/01	
Application		Filing Date			Examiner		Art Unit
10/535,230-Conf. #5656		February 16, 2006		K. A. Moss			1797
pplicant(s): Gise	ela Gauchel						
vention: MARKE	тс	THE COMMI	SSIONER FO	OR PAT	ENTS	OSTIC ME	THODS
Fransmitted here The fee has been					ication.		
		CLAIM	S AS AMENI	DED			
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present		Rate		
Total Claims	15	- 20 =	0	x	26.00		0.00
Independent Claims	1	- 3 =	0	x	110.00		0.00
Multiple Depend	ent Claims (ch	eck if applicabl	e)				
Other fee (pleas	e specify):						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:							0.00
Large Entity x Small Entity							
x No additiona	I fee is require	d for this amer	ndment,				
Please charg	ge Deposit Acc	ount No	ir	n the am	nount of \$ _		
A check in th	e amount of \$		to cover	the filin	g fee is encl	osed.	
Payment by	credit card. Fo	orm PTO-2038	is attached.				
X The Director as described	is hereby auth below. A dup						1180
x Credit ar	y overpaymer	ıt.					
x Charge a	ny additional fil	Ing or application	n processing f	fees requ	uired under 3	7 CFR 1.1	6 and 1.17.
Mark Ø. Schneid		2008		[	Dated:	January 7	7, 2009
GIFFORD, KRA 2701 Troy Cent Post Office Box Troy, Michigan	SS, SPRINKL er Drive, Suite 7021	E, ANDERSO	N & CITKOW	SKI, P.O	<b>C</b> .		
(248) 647-6000							